

J. Steve Campbell, L.S.  
R3 BOX 2 FARMERSBURG, IN 47850  
(812) 696-2717

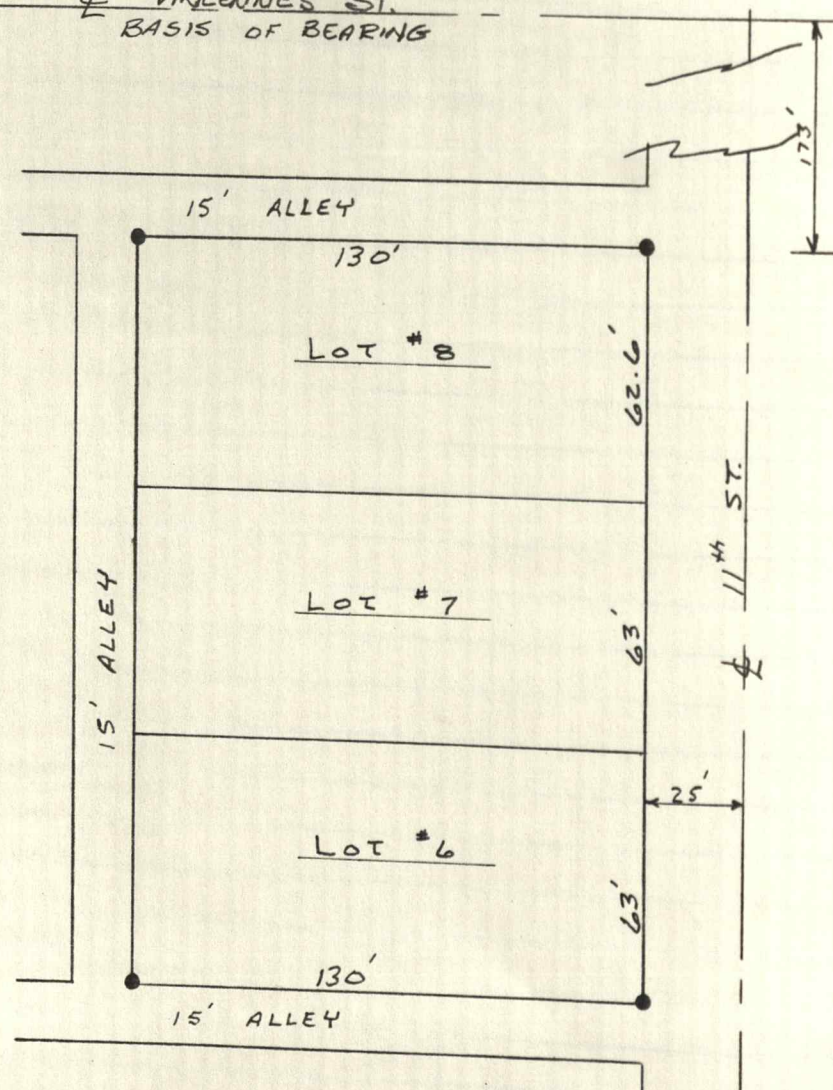
J. Steve Campbell, L.S.  
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DESCRIPTION OF PROPERTY

Lots numbered six (6), seven (7), and eight (8) in Block Six (6) in W. Hubbard's fourth addition to Linton, Indiana. Subject to all easements, restrictions, covenants and agreements of record.

PLAT

VINCENNES ST.  
BASIS OF BEARING



SCALE: 1" = 50'

• DENOTES IRON PIN

TO: Ken Hamilton, Sr.  
Ken Hamilton, Jr.  
George Tucker  
Cornellia Utterback  
Jerry Marquart  
Audrey Gray  
Joyce Caze

FROM: J. Steve Campbell  
Registered Land Surveyor

This letter is to inform all adjoining land owners that on November 7, 1987 or soon thereafter, I will be surveying Lots 6, 7, and 8 in W. W. Hubbards Fourth Addition which belong to Max Dye.

Once the job has been completed, the survey plat along with proof of notice to adjoining land owners will be filed in the Legal Survey Record Book in the County Surveyor's Office.

Within 10 days after filing of the survey, notice shall be given to all adjoiners that the survey has been completed and filed. The survey will follow the Indiana Code of 1971, Title 17, article 3, chapter 63.

Sincerely yours,

J. Steve Campbell  
J. Steve Campbell

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

3. Article Addressed to: TERRY MARQUART  
90 SE 11th ST.  
LINTON, IN 47441

4. Article Number: P 086 010 947

Type of Service:  
☐ Registered ☐ Insured  
☐ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X [Signature]  
6. Signature - Agent: X [Signature]  
7. Date of Delivery: OCT 15 1987

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Feb. 1986 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

3. Article Addressed to: GEORGE TUCKER  
1069 E. VIN ST.  
LINTON, IN 47441

4. Article Number: P 086 010 946

Type of Service:  
☐ Registered ☐ Insured  
☐ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X [Signature]  
6. Signature - Agent: X [Signature]  
7. Date of Delivery: 10/15/87

8. Addressee's Address (ONLY if requested and fee paid)

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3. Article Addressed to: AUDREY GRAY  
23 SE 10th  
LINTON, IN 47441

4. Article Number: P 086 010 950

Type of Service:  
☐ Registered ☐ Insured  
☐ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X [Signature]  
6. Signature - Agent: X [Signature]  
7. Date of Delivery: OCT 16 1987

8. Addressee's Address (ONLY if requested and fee paid)

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1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

3. Article Addressed to: KEN HAMILTON, JR  
1039 E. VIN ST.  
LINTON, IN 47441

4. Article Number: P 086 010 945

Type of Service:  
☐ Registered ☐ Insured  
☐ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X [Signature]  
6. Signature - Agent: X [Signature]  
7. Date of Delivery: 10/15/87

8. Addressee's Address (ONLY if requested and fee paid)

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3. Article Addressed to: KEN HAMILTON, SR  
1039 E. VIN ST.  
LINTON, IN 47441

4. Article Number: P 086 010 944

Type of Service:  
☐ Registered ☐ Insured  
☐ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X [Signature]  
6. Signature - Agent: X [Signature]  
7. Date of Delivery: 10/15/87

8. Addressee's Address (ONLY if requested and fee paid)

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3. Article Addressed to: JOYCE CAZE  
1050 SE A ST.  
LINTON, IN 47441

4. Article Number: P 086 010 949

Type of Service:  
☐ Registered ☐ Insured  
☐ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X [Signature]  
6. Signature - Agent: X [Signature]  
7. Date of Delivery: OCT 16 1987

8. Addressee's Address (ONLY if requested and fee paid)

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1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

3. Article Addressed to: CORNELIA UTTERBACK  
1060 SE A ST.  
LINTON, IN 47441

4. Article Number: P 086 010 948

Type of Service:  
☐ Registered ☐ Insured  
☐ Certified ☐ COD  
☐ Express Mail

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